



Report of Ethiopia's high level delegation visit on nutrition and food security to Brazil and WFP Center of Excellence to fight Hunger

July 20-July 28, 2015 Brasilia, Brazil

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- 1. Ministry of Foreign Affairs
- 2. National Food and Nutrition Council (CONSEA)
- 3. Ministry of Social Development
- 4. Food and Nutrition Secretariat-Federal District
- 5. Ministry of Health
- 6. National Health Surveillance Agency (ANVISA)
- 7. Federal District-Secretariat for Health and Nutrition
- 8. Health Facilities
- 9. Smallholder farmers Market, Organic, and Fish market (CEASA)
- 10. Public Research Enterprise for Agriculture (EMBRAPA)

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1. Introduction

The Ethiopian government focus is geared towards increasing availability of food through improved economic growth and better agricultural productivity coupled with activities focusing on nutrition promotion and prevention as it is critical for the countries growth. The powerful influence of nutrition on population health, cognitive development, productivity and national economic growth has been documented through decades of scientific research and is now receiving increasing attention on global and national policy agendas.

The Ethiopian government has demonstrated its policy commitment to nutrition by developing a standalone National Nutrition Strategy (NNS) and its National Nutrition Program (NNP) in 2008. Different guidelines are prepared and nutrition, especially the reduction of chronic malnutrition (stunting) is incorporated in to the Growth and Transformation Plan (GTP). There are also various sectoral strategies and programs developed which have created the opportunity to mainstream nutrition into responsible sectors, and put legal frameworks to enforce some key nutrition interventions. Recently, the government reaffirms its commitment to nutrition and food security by launching the 'Sekota 'Declaration at the Financing For Development Conference, with an ambitious goal to end hunger and undernutrition in Ethiopia by 2030.

It has established a federal and regional multi-sectoral nutrition coordination bodies with the aim to improve the nutritional status of its population through multi-sectoral approach by implementing nutrition-specific interventions delivered with high coverage and quality and the creation of nutrition-sensitive policies and programs across the NNP implementing sector.

The challenge now is to implement and sustain effective multi-sectoral coordination strategies at different levels as the implementation of these strategies take account of stakeholder commitment within and among government Ministries, development partners, academic institutions and the private sectors.

The visit to Brazil was therefore organized to learn from the successful implementation, progress, and achievement made by the Brazilian government to address the food security and nutrition needs of the population to mitigate the food insecurity and nutrition issues and how different sectors work together to improve nutrition and food security.

The visit to Brazil was organized by the Ethiopian government in collaboration with WFP Center of Excellence against Hunger and WFP Ethiopia, USAID through Save the Children, and UNICEF Ethiopia.

The delegation travelled to Brazil from 20- 27th of July 2015. The Ethiopian Embassy and the WFP Center of Excellence (See text box 1) in Brazil facilitated all what is required for the visit. The Ethiopian Embassy has welcomed the delegation at Sao Paulo airport and facilitated all what is required. The group of delegates included:

- 1. Sate Minister of Ministry of Agriculture and Rural Development,
- 2. State Minister of Ministry of Industry,
- 3. State Minister of Ministry of Youth Children and Women affairs,
- 4. State Minister of Ministry of Water, Irrigation and Energy,
- 5. Director of MCHN, FMOH
- 6. Deputy Director General of EPHI,
- 7. Director General of FMHACA
- 8. Deputy Head of Afar regional BOE
- 9. Head of Tigray regional BOH
- 10. Head of Tigray regional BOE
- 11. Head of Oromia regional BOH
- 12. Deputy head of Oromia regional BOE
- 13. Regional Vice-president and Head of BOE for Somali region
- 14. Regional Vice president and Head of BOE for Amhara region,
- 15. Deputy head of SNNPR regional BOH
- 16. WFP and Save the Children international.



WFP Center of Excellence against Hunger in Brazil

The WFP Center of Excellence against hunger is a global hub to the south to south cooperation, capacity building and policy dialogue in food and nutrition security and social protection.

The Centre is the result of a fruitful partnership between the WFP and Brazilian government to support governments in Africa, Asia and Latin America towards sustainable solutions against hunger. It is a knowledge platform that brings nations together to help them develop nationally owned policies through high-level policy advice, technical assistance, and peer-to-peer dialogue opportunities.

Forged to enable sound cooperation processes and horizontal partnership with countries, leveraging the "Brazilian Experience" and other good practices and combining it all with the WFP's expertise, in country knowledge and global presence are at the core of WFP Centre of Excellence against Hunger.

The WFP Centre's tools facilitate peer-to-peer policy dialogue, knowledge building, planning and capacity development on a South-South cooperation perspective: government ownership, tailored solutions, support to bolster enabling environments.

With this aim the Center of Excellence has with all technical support facilitated the study visit and willing to provide further technical support for actions and cooperation's that are required to implement experiences from the study visit.

2. Objective

- To gain insight into the various components and principles of a "multi-sectoral nutrition coordination platform."
- To learn how Brazilian government have attempted to reduce the level of chronic undernutrition (stunting), principles in place and their achievements, challenges and experiences.
- To take advantage of the opportunities for the delegates to reflect together on how Ethiopia might best strengthen its multi-sectoral nutrition coordination in order to advance the nutrition agenda.
- To create long term partnership on food security and nutrition with Brazilian government.

3. Visit Proceeding

20.07.2015 (Day 1)

Welcomed by the Ethiopian Embassy at Sao Polo airport

21.07.2015 (Day 2)

- Start up and welcoming note by the Brazilian Government and head of the Center of Excellence
- Security briefing on the overall precautions that has to be taken while in Brazil
- Meeting with Ministry of Health, Executive Secretary and recieved an initial briefing
- Presentation from the Ethiopian delegation on the NNS and NNP
- Meeting with CGFome Minister Milton Rondó, Minister responsible for the coordination of CGFome, General International Coordination to Fight Hunger in the Brazilian Minister of Foreign Affairs
- Overview of Brazilian nutrition programs and Technical presentation and discussions with the Ministry of Health on combating stunting, fortification nutrition programs and lessons learnt

22.07.2015 (Day 3)

- School Feeding in Brazil Albaneide Peixinho with Albaneide a Nutritionist and former School Feeding National Coordinator in Brazil and was responsible for the SF programme for more than 10 years
- Meeting with ANVISA (National Health Surveillance Agency)
- Reception at the Ethiopian Ambassador's residence

23.07.2015 (Day 4)

- Meeting with Under Secretary for Food and Nutrition Security of Government of Federal District (GDF) Undersecretary Jefferson Urani (Presentation about the Community restaurant)
- Meeting with the National Food and Nutrition Security Council (CONSEA) (TBC)
- First discussions for Strategic Planning (at CFN)

24.07.2015 (Day 4)

Field Visit

 Visits to CRAS (social protection center), visit to health facility providing community level nutrition services, human milk bank –

25.07.2015 (Day5)

• Visit to CEASA Smallholder farmers Market

4. Organization of the visit

How it is done

As an organizer of the mission the MOH has been facilitating all the required information from each delegate that will help to create vendors, book flights and Hotels. The MOH and the Ethiopia WFP country office have had teleconferences with the Center of Excellence and frequent communication for the smooth facilitation of the visit including working on the agenda and logistics facilitation.

At Addis level the delegates also had a meeting to receive briefings organized by MOH on the overall all mission agenda.

Team management

The delegation was led by the state Minster of Agriculture and rural development which has taken the overall responsibility of coordinating, managing and directing the teams with support from MOH.

Overall 3 teams of 1 to 5 networks were established from the different sectors with rapporteurs and a chairpersons with the objective of documenting all the lessons learned and issues raised while visiting and discussing with the different organization and field visits.

Based on the team arrangement, discussions at the end of each day has been made to capture lessons learnt and issues raised has been documented. After the group discussions each of the 1 to 5 leads and rapporteurs have been meeting together to receive update and cross-fertilize ideas and consolidate lessons learnt and identify issues.



5. Lessons

5.1. Lesson learned

General

Though the earth produces enough food for its inhabitants, about 800 million people live in hunger. Currently, one out of three people have some form of malnutrition while about 178 million children are stunted. Such hunger is attributed to limited access to food and the inability of families to purchase the same. Brazil has been one of the countries soaked in the hunger trap for a while till the dawn of the zero hunger strategy. Augmented with other socioeconomic transformations, the country is scrapped from the poverty map of the world.

Food and Nutrition security has been at the heart of Brazil's political agenda for decades and it has matured from mere focus on food and feeding programs to integrated focus on nutrition. Underlying the constitutional act of the 'right to food', Brazil has ensured the availability of systems that can feed communities, students and less to do families intermingled with strategy of empowering small holder farmers. The country's main focus has been on investing on the people for future productivity that has already paid off. It has transformed from being the most indebted to a lender, from food insecure to food and nutrition security, and from highly unemployed to <5% rate of unemployment.

Currently, the Ministry of Foreign affairs has a humanitarian response wing that supports other countries of similar context in bringing such concepts of social security and protection underpinned by the concept of community resilience and food acquisition programs (eg. Purchase for Africans from Africa). It has agreed with the African Union to bring this agenda onto the portfolio of Africa in its zero hunger strategy. The ministry is also engaged in south-south cooperation (Horizontal) to facilitate learning between countries.

Brazil has strong coordination and accountability mechanism in light of food and nutrition security whereby the civil society plays a crucial role. National coordination is led by a council of 60 core members whereby two third are representatives of the civil society. The isolated focus on food only for the past few decades has created a double burden by both under nutrition and obesity. The country has about 116,000 nutritionists who are engrained into the system ranging from food production system to utilization, regulation and monitoring. Research institutes and academia are playing critical roles in producing evidence for decision making on top of the highend digital nutrition surveillance system the country owns.

The national food and nutrition security plan is the mother document that guides the entire interventions. The ministry of health has nutrition and food policy to define the standards of nutrition services and monitor the progress. It also defines the required model of care for nutrition and ensures the availability of required inputs and systems. The implementation of the plan make best use of the clear role division between the ministries in conducting nutrition specific and sensitive interventions. However, the process has been gradual and phased where it started with the Zero-hunger strategy (Feeding access, Family farmer strengthening, Income

increase, Articulation and mobilization) followed by Brazil without misery and now they have strategy for obesity prevention and control.



School feeding Program

School feeding program is one of the oldest program in Brazil since 1950s and it was later boosted with the zero hunger strategy to become universal. It currently serves about 43 million students (about 25% of the population) from Kindergarten to High school. The program is federal government funded and costs about 25 billion USD yearly (five times increment over five years). States and municipalities are responsible to cover other expenses related to human resource and utilities while managing the system. It is a strategic program that addresses education, health and small holder farmers' productivity. School feeding is delivered in the 161,000 schools all over the country.

The program has basic principles such as engagement of all appropriate stakeholders, availability of information, standard guidelines and legal frameworks. It also emphasizes on cultural sensitivity and adaptation of the foods availed for schools on top of nutrition and food education given to students. Social accountability, sustainability and continuous monitoring and evaluation of the program are the other aspects.

The daily feeding covers a minimum of 20% nutrition requirement of every student and the foods compositions and quality of service is monitored and supervised. The food is supplied from the small holder families with special procurement waiver that doesn't require tender.

Salt iodization and Food Fortification

Brazil has eliminated Iodine deficiency through a mandatory salt iodization program. A law was passed some 30 years back to make iodination universal and industrialized. Salt level monitoring is done by the ministry of health through urine testing for iodine and goiter surveillance. The surveillance agency for food and nutrition assesses companies producing the salt and also does testing on samples in the market. They have also modified the agreed level of iodine amount in salts as Brazilian take more salt than the international average. Salt is produced in sites found in five states and it is regulated production.



Flour fortification with iron and folic acid have been implemented on maize and wheat (popular cereals used in Brazil) to decrease level of population anemia and neural tube defect. It originally started with voluntary fortification and later became mandatory. Millers have been used to fortify products from the family though they face portioning problem (bigger packaging of the iron and folate).

Currently, they are piloting micronutrient powder containing vitamins and minerals but they are not sure whether to continue or not as the evidence on the area is very thin. Generally, food fortification and nutrition monitoring is done by ministry of health, agriculture and ANVISA jointly.

Nutrition management in the federal district (Brasilia)

The district of Brasilia has a structure for food and nutrition under the district health Secretariat and sub units for nutrition in hospitals and communities. The district is responsible for procurement of food, supplies and equipment that is made yearly. The expense for patients requiring nutrition intervention both in hospitals and outreach is increasing every year reaching 20 million Brazilian reais in 2015.

They have healthy eating information and education program to promote healthy eating through IEC/BCC. Adolescents are addressed to be informed of health eating through school based work groups; using methodological tools like food kits on a plastic (eg. Sugar impact and level). They are also responsible to make regulations that relate to marketing of foods, pacifiers, bottles and nipple shields. Moreover, the district trains tutors on nutrition through its FEED AND BREASTFEED BRAZIL STRATEGY. Needless to mention, the federal government also regulates the media commercials for specific foods such as powder milks.

Nutritionists are members of the family health teams which are members of the primary care health system that are composed of doctors, nurses and other health professional. Food and nutrition surveillance is done from analysis of data that come from epidemiological studies and primary care information system for nutrition. The system also captures foods eaten by individuals as a consumption markers (eg. The number of hamburgers eaten in one week by sample of people). They also have an obesity care of line that sees obese people in General form and ensures the model of care is appropriate. During implementation of the programs, they face challenges related to Human Resources, budget, data systematization (most things happen on paper), infrastructure.



Social Development Secretariat of the federal district

The secretariat is responsible to lead and coordinate the implementation of the food and nutrition security plan and it convenes the district's council on nutrition and food security. Food has been made available originally at household level but advanced to establishment of community restaurants that can be used by the less to do families by paying 0.3 USD from the 2 USD cost of producing each meal.

Community restaurants that are used for urban areas are built and equipped by the federal government and the district like any other states responsible to purchase the food and hire professionals or company to private contractors. In these restaurants, they also deliver food and nutrition education by nutritionists. In areas where there is limited resources community kitchens have been used. They have had helped Mozambique to initiate these community kitchens by using mothers of the kids to cook the food in the kitchens. The community restaurant serve an average of 2000 dishes everyday but community kitchens can serve smaller groups.

National food and nutrition security plan

The council for food and nutrition security is composed of ministries and civil society with one third/two third composition respectively. It is a council that serves as partly think-thank team. The minister of Social development chairs the council and the secretary is the ministry of social development which also is the Secretariat. The council has technical committees and working groups on different issues that are either permanent or temporary.

Councils are established first by a conference followed by creation of the policy and system and later develop the plan of action. The council is crucial establishment that fosters both intragovernmental accountability and with the civil societies. The municipal and state council are established and led by the highest authority of their respective government. Finances are given by the federal government and respective structures at lower level; but federal government might financially help during the establishment process. The actual members of the chamber are the ministers, however, they can delegate their undersecretary or directors of any departments and one term of membership stays for 2 years.

The Secretariat, which is the Social development ministry is the one that links with the president and manages the communication between the president and the council. The media also has a role as they keep line of communication open with sense of accountability. Generally, the council addresses issues spanning production, distribution, consumption and the entire food security system.

Milk bank

Brazil is also famous for its human milk bank. There are about 160 milk banks in the entire country with a joined capacity of 100,000 liters a year. It was started in the 1940s which had stages of doing it by form of a sale and later become free. Currently, 95 % of the milk is

collected from volunteers from the community and the rest from mothers who come to health facility. The program is started to curb the high rate of death of infants associated with bottle feeding.



In preparing the collected milk, there is series of pasteurization and

sterilization process to make the milk ready. The equipment were expensive originally but later the technology was adapted to Brazil resulting in 17 times decrement of the cost.

The milk is collected using jars that are given to lactating mothers for them to milk and store in deep freezer until it is collected by the firemen/women who will bring the bottles to the milk bank. Firemen are used because there is high level of trust in Brazilian community on them.

Family health center

Family health center is part of the primary care service which is smaller in size and targets on family services. It has family units that are composed of physician, nurse and community agents to do outreach services. Some such centers have also dental technician. Such center is more oriented to health promotion services rather than curative. The center has 5 consultation room,

Family planning service and prenatal care. The construction with the basic equipment, furniture and dental chairs costs about 1 million USD. The center gathers information and uses for decision making. These center also gives nutrition advises such as breastfeeding demonstration and advice to mothers.



Community restaurant

The community restaurant we visited has state of the art kitchen that is prepared based on the ANVISA standards. The kitchen is washed every day and infrastructure every two days and roof every week. In order to ensure quality monitoring, they keep every sample of food for 72 hours to examine if any poisoning happens. No leftover is eaten by anyone and it is disposed. The center has 46 (35 for production) staffs hired by the contractor of the restaurant. The facility is built by federal government but utilities are paid by the contractor who has got the contract from the state. All logistic inputs are prequalified and produced in companies who meet the ANVISA standards. Nutritionists are the ones to supervise the proper sanitation practices and they are all trained. Staffs working in the center undergo series of medical examinations that need to be renewed every year.



Health center visit

In the visit to the health center, we have visited the unified nutrition and food surveillance system which is a digital system to gather and analyze nutrition data. In every center, ever patient's nutrition data is collected using a paper format that captures both the nutritional status and food eaten. The information system is called SISVAN that digitizes the actual data on paper. The system uses an individual identifier medical number and data can be entered. The system analyses information that can be used by the health center to make decisions and appropriate interventions (Eg. they have identified more number of people were being obese and they started reaching the families to educate on healthy eating).

The system also analyses and compares with others areas. The health center can see the data of

not only theirs but also others and they can do comparison to see where they are. The data is web based and all data goes to data center in ministry of health. Health centers in other municipalities without Internet are required to bring their paper information to a place where there is Internet;



if not respective states or municipalities they won't get their conditional cash transfers.

Social development ministry

The visit to the social development ministry was made as a form of concluding the visit. One director in the ministry presented the entire structure as a form of summary. The presentation emphasized on

- 1- The Zero hunger strategy that served from 2003-2010 during the president Lula,
- 2- Brazil without poverty/misery that served from 2011- 2014 during presidency of Dilma led Brazil to be scrapped from the poverty map...
- 3- Inter-sectoral strategy for obesity reduction is the currently active strategy that is designed in response to increment of obesity due to the transition of the Brazilian feeding habit from traditional to ultra- processed food.



Farmers Market

We visited a market place where cooperatives and farmers can bring their products and sale. In this market, 20,000 tons of Food is marketed every week; 66 thousand tons is marketed every month. The market place is built by the district federal and there are such similar establishments in other 26 states mainly aimed at facilitating access to market for farmers and cooperatives.

Family farmers are given special support and they can rent a space for about 40 USD per month because it is subsidized but those who are family farmers out of that district pay 80 USD. The payment is inclusive of cleaning, security and electric power. CEASA is the name of the institution that manages the space



and collects data that will use to make policies and also used for setting prices.

Whenever there is leftover of the food, they collect and donate to the food bank (procure for PAA from the farmers with DAP); the food is also donated to some institutions who feed the poor.

Some cooperatives also stock products of the farmers and sell it for them and take 20% of commission (Eg. Organic products cooperative do so). In doing so, there is a licensing process. The family farmers have their own area/spaces to sell their products. For those who come from distance, there is even a sleeping hostel next to the store.

The family farmers are supported by extension workers in the whole cycle; production, technology, market etc. 200 farmers are served by one extension worker but depends on the type eg. For green leaves producers it is more intensive than the grain producers. EMBRAPA is the one to produce the technologies to be used by the farmers and it has about 40 research centers in Brazil and it has an office in every state. Each center focuses on specific item eg. Orange...

Bio fortification (EMBRARA)

We visited Public Research Enterprise for Agriculture (EMBRAPA) a research center responsible for bio-fortification of stable crops and horticulture. The center works in partnership with Harvest plus to improve the national quality foods consumed by farmers who are not reached through factory fortification products. It has a well-established laboratory and field trail places and staff too. Because of EMBRAPA, Brazil is the only country where eight crops studied and bio-fortified at the same time namely Zinc rice, Vitamin A orange sweet potato, iron beans, vitamin A cassava, Vitamin A maize, Zinc wheat , pumpkin and cowpeas.



5.2. Consolidated Learning

A. Nutrition and food security policy and program

- Legal & policy framework and design
- Food security is one of Ethiopia's top development and political agenda. Nutrition security is part and parcel of food security, which Brazil has learned during the early period of Zero Hunger and made nutrition and food security a national social development and inclusive growth agenda. Thus, in our country, nutrition should be integrated with food security and considered a social development and political agenda. In early July, 2015, the government has committed to end hunger and undernutrition by 2030 and named the initiative as *Sekota* declaration. *sekota* is a very remote district with challenging terrain to end hunger and undernutrition and was the epicenter of Ethiopian famine in the 60'. The "Seqota declaration" can be used as a means to **bring the nutrition agenda to the political platform as part of ensuring food security.**
- Our current NNS and NNP incorporates limited food security and social investments and its
 integration with food security strategy is not clearly articulated. The country need an
 overarching strategy that addresses nutrition and food security together. Thus, the current
 revision of NNS and NNP should be comprehensive to include food security and named
 Food security and Nutrition strategy and plan. The delegation has to take major role in
 maneuvering the future of the NNS.
- Civil society and community engagement is key to ensure nutrition and food security as a
 political and social development agenda and sustainably tackle undernutrition and food
 insecurity. The community mobilization and engagement through the one in five network to
 support mothers to give birth at health facilities can be used to create a movement to create
 zero tolerance to hunger and undernutrition and ensure participation and ownership of the
 community in this fight.

• Institutional arrangement

Ethiopia has a nutrition coordinating committee at the national level chaired by MOH and composed of state ministers from nine ministries with two representative of civil society, and a similar structure at regional level that is chaired by regional health bureau. There is a technical committee under this coordinating bodies to support technically. The national nutrition

coordinating body and technical committee have similar arrangement with Brazil. The ministry of Social Development and fight against hunger is the coordinating and executive body supported by an advisory food and nutrition council at the president office. However, our coordination bodies are not as effective as Brazil's because they don't have executive body and are not accountable to higher political and government body as in Brail, which is accountable to the president as well as the Social development ministry, which is legally mandated to lead the nutrition and food security policy. Thus, there are areas that we learn from Brazil to strengthen the existing coordination mechanism to execute the high current mandate and realize the ambitious goals of *Sekota* declaration.

- The NNCB and RNCB requires some form of stewardship by someone higher than ministry
 and bureau respectively. They should be accountable to the Prime Minister at national level
 and presidents at regional level because nutrition and food security cut across economic and
 social clusters.
- We need Food and Nutrition Council at federal and regional levels that would be accountable
 to PM and regional presidents respectively. For high level commitments, in Ethiopia, it is
 customary to form a council from government ministry and non-government stakeholders at
 the PM to play an advisory role and deliver the commitments.
- We should have **legally empowered** and structured coordinating ministry for food and nutrition. The ministry will be decided based on assessment of our context.
- we need an integrated and multi-sectoral nutrition and food security communication strategy
 to create awareness and advocate for key stakeholders including communities to the new
 approach of food security and nutrition strategy.

B. Nutrition and food security program design and implementation School feeding program

Ethiopia can learn a lot from implementation of School Feeding Program (SFP) in Brazil especially in terms of coverage and quality of service, customizing food menu to cultural context, and creating market for small holder farmers.

• Ethiopia has to take SFP as an investment on people, not an expenditure, and take actions beyond giving a leap service. It should finalize the SFP strategy, mobilize resources, and set out clear guidelines and manuals for implementation for different stakeholders.

- It is strategic to start phased implementation of SFP by focusing on specific geographic areas as it will be difficult to cover all at once because of limited current capacity and resource.
- The consideration of having a purchase from small holders or cooperatives in Ethiopia should be considered to encourage farmers and ensure sustainability of SFP. The legal framework of Brazil to enforce that 30% should be purchased from family farmers is good practice we can learn. In addition, rural primary schools can use their land to produce vegetable and fruits that can be used for SFP.
- We need to ensure there is an effective and technology supported surveillance and evaluation system built into the SFP to make informed decision.

Food fortification and regulatory

Brazil Food Fortification and Salt Iodization program is effective and well regulated. It has reached majority of the population using flexible and context specific approach. Decision to fortify or what method to use is informed with data and research. Ethiopia can learn the following when designing and starting its fortification program.

- Used different approach for fortification: family farm and industrial fortification and mix of voluntary and mandatory fortification.
- Our fortification program should ensure academia, EPHI, and regulatory work together to make informed decision because food fortification should be handled cautiously and evidence based.
- The Industries need to be supported and involved from the outset.
- Utilization of millers for community fortification can be one critical entry point and we need
 to select the appropriate staple food for based consumption patter of specific regions or
 community eg. Teff in the northern and Enset in the southern
- Bio-fortification with minerals and vitamins using food basket approach (bio-fortifying several crops consumed by households) will improve micronutrient intake to rural communities who don't have access to industrial fortified foods in a sustainable way.
- We need to formulate food consumption and minerals data dashboard on Ethiopia to show what we have and what we will use.
- Institutional collaboration among the two countries regulatory bodies ANVISA and FMHACA to facilitate the learning.

Nutrition services at community and health system

Family health strategy

The family health strategy is comprehensive, multi-disciplinary, and family centered care including nutrition. The family health strategy of Ethiopia can learn from the Brazil's experience and it is ongoing in urban health extension in Ethiopia.

• The family health team (multidisciplinary team) approach can be implemented in urban HEP but it should be considered the future of the health extension worker in rural areas too.

Community restaurant

Community restaurants show the commitment of the Brazilian government to invest on good nutrition for its people. However, it is expensive program to avail for the all population in Ethiopia but it can be applicable in institution and urban PSNP. Ethiopia can consider the principles of community restaurant as follows:

- It can be used to improve the nutritional quality of nutrition and food services in hospitals, which serves objective three of the NNP, higher institutions, and civil servants cafeteria, and elderly and orphanage centers food menus by standardizing the menu. It can also be applicable in the new urban PSNP.
- In order to improve the complementary food for children 6-24 months, we can start community kitchen at health posts and schools to improve the quality of the current cooking demonstration and to link with millers and food produced at FTCs or by cooperatives.

Milk bank

It is an impressive and lifesaving approach to promote breast feeding especially for pre-term, which shows commitment of Brazilian government to support breast feeding.

- It should be started in our country in hospitals with intensive care unit for newborns and orphanages because it contributes to reduction of newborn mortality, which helps to achieve our commitment to reduce neonatal death.
- Milk bank need good social mobilization, logistic, and quality control system because it needs high precaution and monitoring.

Farmers Markets

- Support cooperatives to establish diversified wholesale market places for family or small holder farmers to sell the foods they produce.
- AEWs provide support to the whole cycle support (inputs from production, technology, and market) to small holders farmers and their cooperatives

C. Cross-Cutting

Brazil built its human resource capacity for nutrition and food security at all levels, who are instrumental to execute all programs and achieve the marked reduction in undernutrition and the current fight against obesity. It has more than 100,000 nutritionists. Ethiopia can achieve its ambitious nutrition and food security goals is it invests on its human resources as Brazil did.

- Scale up the training of nutritionists in the four universities, who are currently train nutritionists, after assessing the HR need to implement the revised nutrition and food security.
- Clearly define the responsibility and carrier structure for nutritionists at national, regional and woreda level
- Build the capacity of the existing decentralized structure of NNS implementing sectors and civil societies.

D. Monitoring, evaluation & research

The Brazil experience shows learning and evidence are key to nutrition and food security program to monitor the progress and improve program implementation.

- An integrated multi-sectoral nutrition information system that document all nutrition and food security information at one portal. This will improve data utilization and harmonization and to make informed decision by experts and policy makers and share information to the public.
- Universities/ experts and institutes in Ethiopia should serve as knowledge tower for nutrition and food security and working closely with sectors and regulatory bodies.
- The information system should use the maximum technology rather than relying on paper.

6. Major Recommendation

Policy framework and institutional arrangement recommendations

- Capitalize on the "Sequta declaration" to bring the nutrition agenda to higher political platform.
- Revise the current revision of NNS and NNP to be an overarching Food security and Nutrition strategy and plan. This delegation has to participate in reviewing the document.
- Nutrition and food security coordination (NNCB and RNCB) should be accountable to the prime minister at national level and regional presidents at regional level.
- Establish Food and Nutrition Council at federal and regional levels that would be accountable to PM and regional presidents respectively.
- Conduct an assessment to identify the ministry that should house or lead coordination in line
 with the new concept of comprehensive food security and nutrition strategy and nutrition is a
 social development.
- Bring on board for MOLSA decision makers to understand social development and nutrition taking into consideration their responsibility for social development in AGP 2.

Programmatic recommendations

- Develop an integrated and multi-sectoral nutrition communication strategy
- Start phased implementation of home grown SFP.
- Review our flour and oil fortification and Bio-fortification program in line with the evidences and concerns that are shared at the visit.
- Ensure academia, EPHI, and regulatory work together to make informed decision.
- Assess the practicality of family health strategy in Urban HEP and health centers from our context
- There is a need to initiate community kitchen at the HP and primary schools and link with millers.
- Pilot milk bank in hospitals with intensive care unit for newborns and orphanages.

Monitoring, evaluation & research

- Establish integrated multi-sectoral nutrition information system.
- Create an integrated registry of beneficiaries for all food security and nutrition programs

• Involve with Universities/ experts and institutes in existing research platforms to support documentation and generate evidence. The existing research platforms is one way of doing it if we expand to involve ARCs and academia.

Partnership and collaboration

- Create the link to institutional collaboration among the two countries regulatory bodies ANVISA and FMHACA.
- Establish partnership with WfP Center for Hunger to support technically the link between food security, nutrition and social development

7. Way forward (Practical)

Activities	Responsible	August				
		W1	W2	W3	W4	
Discus with FMOH and key	FMOH and	X				
stakeholders ¹	delegates					
Present the key recommendations to the	FMOH and			X		
NNCB	head of					
	delegate					
Share final report to PM, first lady	FMOH		X			
Ministers ,and regional presidents						
Feedback to respective ministries and	Delegates	X				
regional presidents						
Arrange a meeting for the delegates and	FMOH		X			
NNS and NNP review team to incorporate the new ideas into the revised						
committee to						
Dian for the implementation of the	NNCD					
Plan for the implementation of the recommendation in consultation with the	NNCB				X	
NNCB						

Debriefing the consolidated learning and recommendation to the chair of National Nutrition Coordination Body.

Each delegates should debrief their respective ministers and presidents the learning and recommendation and report back to the NNCB by August 15. State Ministers should debrief their respective Ministers, Vice presidents and bureau heads to their respective president, FMOH and FMHACA to Minister of Health and EPHI to key Academia heads.

[•] Present the key recommendation to the next meeting of the NNCB

[•] FMOH delegate will brief the first Lady By August 30.

[•] FMOH and state Ministers in the delegation will brief the Deputy PM by third week of August

8. Addendum

8.1. Logistics

The Ethiopian Embassy arranged the airport pick up and transfer at the Sao Paulo airport and members and delegates flew to Brasilia into two different flights.

At Brasilia airport the delegation has been welcomed by the Ethiopian Embassy in Brazil and transported to the Hotel with transport arranged by the center of excellence. During the week the delegation was supported ort pick up and to and from the hotel to the different meeting venues.

The Ethiopian Embassy staff and staff from the center of excellence have guided and accompanied the team during field visits.

For effective translation and documentation the team had a luxury of having a support of an efficient and effective translator who has done a tremendous job in translating all presentations and filed visits.

Since managing large number of delegates requires a lot of coordination and facilitation, the overall team arrangement and coordination has been effective because small networks of 1 to 5 work better easy for management

Challenges

- The delegates were not able to visit the school feeding programme because of the summer vacation
- Since it was not possible to travel on the same flight from Sao Paulo the Ethiopian Embassy staff and some of the delegates and embassy staff arrived late evening.

8.2. Ethiopian Delegates

	Name	Institution	Title
1	Mebrahtu Meles Gebru	Ministry of Industry	State Minister, Chair for the National Food Fortification Steering Committee and member of the National Nutrition Coordinating Body(NNCB)
2	Frenesh Mekuria Gobena	Ministry of Women, Youth and Child Affairs	State Minister, member of the NNCB
3	Wondirad Mandefro Gebru	Ministry of Agriculture	State Minister, member of the NNCB
4	Kebede Gerba Gemossa	Ministry of Water, Irrigation and Energy	State Minister, member of the NNCB
5	Habtamu Beyene Gebremichael	SNNPR RHB	Deputy Head of Regional Health Bureau(RHB) and Chair for the RNTC
6	Binalf Andualem Ashenef	Amhara BOE	Regional Vice president, Headof BOE and Co-Chair for the RNCB
7	Mawlid Hayir Hassan	Somali BOE	Regional Vice president, Head of BOE and Co-Chair for the RNCB
8	Yibeltal Assefa Alemu	Ethiopian Public Health Institute	Deputy Director General, Chair for the National Nutrition Monitoring, Evaluation and Research Steering Committee
9	Shallo Daba Hamusse	Oromia Regional Health Bureau (RHB)	Head, Chair for the Regional Nutrition Coordinating Body (RNCB)
10	Yehulu Denekew Alemneh	FMHACA	Director General, National Food Fortification Steering Committee(NFFSC) Co- Chair and member of the National Nutrition Coordinating Body (NNCB)
11	Hagos Godefay Debeb	Tigray RHB	Head, Chair for the RNCB
12	Gobezay Weldearegay Kinfu	Tigray BOE	Head, Co-Chair for the RNCB
13	Mohammed Uoda Mohammed	Afar BOE	Deputy Head, Member for the RNTC
14	Ephrem Tekle Lemango	Ministry of Health	Director, Secretary of the NNCB and Chair for the NNTC
15	Girma Bayessa Dinssa	Oromia BOE	Deputy Head, Member for the RNTC
16	Yaver Ali Sayyed	WFP Ethiopia	Programme Officer
17	Tayech Yimer Neway	WFP Ethiopia	Programme Officer
18	Habtamu Fekadu Lashtew	Save the Children / USAID- ENGINE	Chief of Party

8.3. Visit Schedule





ETHIOPIA

STUDY VISIT

Brasília, Brazil

20 – 27th July, 2015

	Monday, July 20	Segunda-feira, 20 de julho
Terminal 1 G3 2092 – 21:59 JJ 3180 – 00:05	Arrival of the delegation in Brasilia Hotel check in 🗲 Windsor Hotel	Chegada da delegação em Brasília Check in no hotel → Windsor Hotel
	Tuesday, July 21	Terça-feira, 21 de julho
09:30	Pick up at the hotel → Itamaraty	Translado do hotel → Itamaraty
10:00 – 10:15	Security Briefing (UNDSS) and presentation of the agenda	Apresentação da agenda e briefing sobre segurança (UNDSS)
10:15 – 10:45	Opening Session (with Brazilian government) Held at the Ministry of Foreign Affairs	Abertura (com governo brasileiro) Ministério de Relações Exteriores
10:45 – 11:30	Meeting with Ministry of Health, Executive Secretary	Reunião com Ministério da Saúde, Secretária Executiva
11:30 – 12:00	Presentation of the National Nutrition Strategy (NNS) and National Nutrition Programmes by the Government of Ethiopia	Apresentação da Estratégia Nacional de Nutrição e Programas Nacionais de Nutrição pelo Governo da Etiópia
12:00 – 13:00	Meeting with CGFome – Minister Milton Rondó	Reunião com CGFome – Ministro Milton Rondó

	(Milton is the Minister responsible for the coordination of CGFome, General International Coordination to Fight Hunger in the Brazilian Minister of Foreign Affairs)	(Milton é o Ministro responsável pela Coordenação-Geral de Ações Internacionais de Combate à Fome (CGFOME), do Ministério das Relações Exteriores do Brasil)
13:00 – 14:30	Lunch (free time) → CFN	Almoço (livre) → CFN
15:00 – 17:30	Overview of Brazilian nutrition programmes and Technical presentation and discussions with the Ministry of Health on combating stunting, fortification nutrition programmes and lessons learnt	Panorama dos programas de nutrição do Brasil e Apresentação e discussões técnicas com o Ministério da Saúde sobre combate ao déficit de estatura, programas de nutrição de fortificação e lições aprendidas
17:30	Return to the Hotel	Retorno ao hotel
	Wednesday, July 22	Quarta-feira, 22 de julho
9:30	Hotel Pick Up → CFN	Translado do hotel → CFN
	School Feeding in Brazil – Albaneide Peixinho	Alimentação Escolar no Brasil – Albaneide Peixinho
10:00 – 12:00	(Albaneide is a Nutritionist and former SF National Coordinator in Brazil and was responsible for the SF programme for more than 10 years)	(Albaneide é Nutricionista e foi coordenadora nacional do Programa Nacional de Alimentação escolar por mais de 10 anos)
12:00 – 15:00	Lunch (free time) → MDS	Almoço (livre) → MDS
15:30– 17:30	Meeting with ANVISA (National Health Surveillance Agency)	Reunião com ANVISA
17:30	Return to the Hotel	Retorno para o hotel
19:00 – 21:30	Reception at the Ambassador's Residence	Recepção na Residência da Embaixadora

	Thursday, July 23	Quinta-feira, 23 de julho
09:00	Hotel Pick Up → CFN	Translado do hotel → CFN
09:30 – 10:30	Meeting with Government of Federal District (GDF) – Nutrition Manager, Fabio Vinicius, Secretary for Health, GDF	Encontro com o Governo do Distrito Federal (GDF) – Gerente de Nutrição, Fábio Vinicius, Secretaria de Saúde do GDF.
10:30 - 11:30	Meeting with Under Secretary for Food and Nutrition Security of Government of Federal District (GDF) – Undersecretary Jefferson Urani	Reunião com a Subsecretária de Segurança Alimentar e Nutricional do GDF – Subsecretário Jefferson Urani
	(Presentation about the Community restaurant)	(Apresentação sobre o Restaurante Comunitário)
12:00 – 13:30	Lunch at the Community Restaurant TBC → CONSEA	Almoço no Restaurante Comunitário → CONSEA
14:00 – 15:30	Meeting with the National Food and Nutrition Security Council (CONSEA) (TBC)	Reunião com CONSEA (TBC)
16:00 – 18:00	First discussions for Strategic Planning (at CFN)	Discussões preliminaries para Planejamento Estratégico (Local: CFN)
18:00	Return to the Hotel	Retorno para o hotel
	Friday, July 24	Sexta-feira, 24 de julho
8:30	Hotel Pick Up	Translado do hotel
09:00 – 17:00	Field Visit Visits to CRAS (social protection center), visit to health facility providing community level nutrition services, human milk bank – TBC	Visita de campo Visita aos CRAS, escola maternal, visita à unidade de saúde fornecendo serviços de nutrição em nível comunitário, banco de leite - TBC

17:30	Return to the Hotel	Retorno para o hotel
	Saturday, July 25	Sábado, 25 de julho
8:30	Hotel Pick Up → CEASA	Translado do hotel → CEASA
09:00 – 12:00	Visit to CEASA Smallholder farmers Market	Visita ao CEASA Mercado de Pequeno Produtor
12:00	Return to the Hotel	Retorno para o hotel
	Sunday, July 26	Domingo, 26 de julho
	Free Time	Dia livre
	Monday, July 27	Segunda-feira, 27 de julho
07:30	Hotel Pick Up → EMBRAPA Hortaliças	Translado do hotel → EMBRAPA Hortaliças
08:30 – 11: 00	Presentation and visit to EMBRAPA (Brazilian Public Research Enterprise for Agriculture)	Apresentação e visita à EMBRAPA (Empresa Brasileira de Pesquisa Agropecuária)
12:00 – 13:30	Hotel Check out Lunch (free time) → CFN	Check out do Hotel Almoço (livre) → CFN
	Brazil's Zero Hunger Experience and Social Safety Nets – Meeting with	A experiência do Brasil com Fome Zero do e Redes de Proteção Social –
14:00 – 16:00	Ministry of Social Development – Executive Secretary and Representatives of CAISAN (Interministerial Chamber for Food and Nutrition Security) and SESAN (Secretary for Food and Nutrition Security) The Zero Hunger strategy and the Brazil	Reunião com Ministério do Desenvolvimento Social – Secretário Executivo, Representantes da CAISAN (Câmara Interministerial de Segurança Alimentar e Nutricional) e da SESAN (Secretaria de Segurança Alimentar e Nutricional).

with their main initiatives, such as the School Feeding National Programme (PNAE), the Food Acquisition Programme (PAA), Bolsa Família (a conditional cash transfer programme) and the framework of food and nutrition security. e suas principais iniciativas serão discutidas como: PNAE, PAA, Bolsa Família e o marco para segurança alimentar e nutricional

16:00 – 17:00	Strategic discussions for next steps	Discussão estratégia para os próximos passos
17:00 – 18:00	Final session	Encerramento
Terminal 1 G3 1691 – 19:40 Terminal 2 AD 5017 – 20:31	Departure to Ethiopia	Partida para Etiópia